

PRIVACY IMPACT ASSESSMENT (PIA)

For the

Mortara X-Scribe™ Cardiac Stress Exercise System

US Army Medical Command - DHP Funded System

SECTION 1: IS A PIA REQUIRED?

a. Will this Department of Defense (DoD) information system or electronic collection of	of
information (referred to as an "electronic collection" for the purpose of this form) coll	lect,
maintain, use, and/or disseminate PII about members of the public, Federal personne	1,
contractors or foreign nationals employed at U.S. military facilities internationally? C	hoose
one option from the choices below. (Choose (3) for foreign nationals).	

	(1)	Yes, from members of the general public.
	(2)	Yes, from Federal personnel* and/or Federal contractors.
\boxtimes	(3)	Yes, from both members of the general public and Federal personnel and/or Federal contractors.
	(4)	No

- * "Federal personnel" are referred to in the DoD IT Portfolio Repository (DITPR) as "Federal employees."
- b. If "No," ensure that DITPR or the authoritative database that updates DITPR is annotated for the reason(s) why a PIA is not required. If the DoD information system or electronic collection is not in DITPR, ensure that the reason(s) are recorded in appropriate documentation.
- c. If "Yes," then a PIA is required. Proceed to Section 2.

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SECTION 2: PIA SUMMARY INFORMATION

a.	Why	y is this PIA being created or updated? Choose one:				
		New DoD Informat	ion System		New Electror	nic Collection
		Existing DoD Infor	mation System	\boxtimes	Existing Elec	tronic Collection
		Significantly Modi System	fied DoD Informati	on		
b. Is this DoD information system registered in the DITPR or the DoD Secret Internet P Router Network (SIPRNET) IT Registry?					e DoD Secret Internet Protocol	
		Yes, DITPR	Enter DITPR Syste	em Ider	ntification Number	
		Yes, SIPRNET	Enter SIPRNET Id	entifica	tion Number	
	\boxtimes	No				
		this DoD informa on 53 of Office of				ique Project Identifier (UPI), required lar A-11?
		Yes		No		
	If "Ye	es," enter UPI				
		If unsure,	consult the Compon	ent IT B	Budget Point of Cont	act to obtain the UPI.
		this DoD informa Notice (SORN)?	tion system or el	ectro	nic collection re	quire a Privacy Act System of
	or lawf		dents that is retrieved			n contains information about U.S. citizens entifier. PIA and Privacy Act SORN
		Yes		No		
	If "Ye	s," enter Privacy A	ct SORN Identifier		A0040-66b DASG	
		Consult the Compo	ssigned designator, r nent Privacy Office f y Act SORNs at: htt	or addit	tional information or	
		or				
	Date o	of submission for a Consult the Co	pproval to Defense emponent Privacy Off			

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e. Does this DoD information system or electronic collection have an OMB Control Number? Contact the Component Information Management Control Officer or DoD Clearance Officer for this information. This number indicates OMB approval to collect data from 10 or more members of the public in a 12-month period regardless of form or format. Yes **Enter OMB Control Number Enter Expiration Date** No \boxtimes f. Authority to collect information. A Federal law, Executive Order of the President (EO), or DoD requirement must authorize the collection and maintenance of a system of records. (1) If this system has a Privacy Act SORN, the authorities in this PIA and the existing Privacy Act SORN should be the same. (2) Cite the authority for this DoD information system or electronic collection to collect, use, maintain and/or disseminate PII. (If multiple authorities are cited, provide all that apply.) (a) Whenever possible, cite the specific provisions of the statute and/or EO that authorizes the operation of the system and the collection of PII. (b) If a specific statute or EO does not exist, determine if an indirect statutory authority can be cited. An indirect authority may be cited if the authority requires the operation or administration of a program, the execution of which will require the collection and maintenance of a system of records. (c) DoD Components can use their general statutory grants of authority ("internal housekeeping") as the primary authority. The requirement, directive, or instruction implementing the statute within the DoD Component should be identified. 10 U.S.C. 3013, Secretary of the Army; 10 U.S.C. 1071-1085, Medical and Dental Care; 50 U.S.C Supplement IV, Appendix 454, as amended, Persons liable for training and service; 42 U.S.C. Chapter 117, Sections 11131-11152, Reporting of Information; 10 U.S.C. 1097a and 1097b TRICARE prime and TRICARE Program; 10 U.S.C. 1079, Contracts for Medical Care for Spouses and Children; U.S.C. 1079a, CHAMPUS; 10 U.S.C. 1086, Contracts for Health Benefits for Certain Members, Former Members, and Their Dependents; E.O. 9397 (SSN); DoD Instruction 6015.23, Delivery of Healthcare at Military Treatment Facilities (MTFs); DoD Directive 6040.37, Confidentiality of Medical Quality Assurance (QA) Records; DoD 6010.8-R, Civilian Health and Medical Program of the Uniformed Services (CHAPUS); Army Regulation 40-66, Medical Record Administration and Healthcare Documentation.

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- g. Summary of DoD information system or electronic collection. Answers to these questions should be consistent with security guidelines for release of information to the public.
 - (1) Describe the purpose of this DoD information system or electronic collection and briefly describe the types of personal information about individuals collected in the system.

The Mortara X-Scribe™ Cardiac Stress Exercise System is a diagnostic monitoring device used to determine the cardiopulmonary status of the patient and to assist in the detection of cardiac diseases. The system consist of exercise computer monitor, interfaced exercise treadmill, interfaced automatic blood pressure system, interfaced stress echocardiography ergometer, and is connected to the Xcelera Cardiology PACS information system
PII collected includes name, SSN, date of birth, patient ID, race/ethnicity, gender, and other medical information as needed for patient care.

(2) Briefly describe the privacy risks associated with the PII collected and how these risks are addressed to safeguard privacy.

The risks associated with the collection, use, and storage of personally identifiable information (PII) and protected health information (PHI) are unauthorized access and unauthorized disclosure. Loss or compromise could occur through insecure or misdirected digital transmission, unauthorized access to or unauthorized viewing of a DoD information system, insecure storage (data-at-rest), or loss of printed copy. Appropriate safeguards are in place to minimize the these risks and the possibility of disclosure.

h. With whom will the PII be shared through data exchange, both within your DoD Component and outside your Component (e.g., other DoD Components, Federal Agencies)? Indicate all that apply.

\boxtimes	Within the DoD Component.				
	Specify.	The PII will be shared with health care providers within the medical treatment facility using this software.			
\boxtimes	Other DoD Components.				
	Specify.	The PII is available to health care providers at Air Force, and Navy medical treatment facilities after the individual has signed an authorization for disclosure.			
\boxtimes	Other Federal Agencies.				
	Specify.	Department of Veterans Affairs (Medical & Benefits Office) and Veterans Affairs Hospitals.			
	State and Local Agencies.				
	Specify.				
\boxtimes	Contractor	(Enter name and describe the language in the contract that safeguards PII.)			
	Specify.	There are some providers and/or staff that are employed in a contractual basis. There are clauses in their contracts requiring compliance with the Privacy Act and			

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(Indiv	Specify. ndividuals Yes (1) If "Yes,"	have the opporture	ers, colleges). Shared with a civilian sector health care provider referred for ostic or therapeutic care. Inity to object to the collection of their PII? No No by which individuals can object to the collection of PII.	
(Indiv	ndividuals Yes (1) If "Yes, viduals revie	have the opporture	nity to object to the collection of their PII?	
(Indiv	Yes (1) If "Yes, viduals revie	describe method b] No	
(Indiv	(1) If "Yes,"		_	
Indiv	viduals revie		ov which individuals can object to the collection of PII	
Rec	viduals revie		by without marriadale can object to the concentration in	
		orm is maintained in th	nent of Defense (DD) Form 2005, Privacy Act Statement - Health the individual's medical records. If the individual does not provide y not be possible, but care will not be denied.	Care the
((2) If "No,"	state the reason wh	ny individuals cannot object.	
Do in	ıdividuals	have the opportun	nity to consent to the specific uses of their PII?	
\boxtimes	Yes		No	
((1) If "Yes,'	describe the methor	od by which individuals can give or withhold their consent.	
Rec	ords. This fo	orm is maintained in th	nent of Defense (DD) Form 2005, Privacy Act Statement - Health he individual's medical records. If individuals do not give their co rehensive care may not be possible, but care will not be denied.	
(2) If "No,"	state the reason wh	ny individuals cannot give or withhold their consent.	
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k. Wha	t infor	mation is provided to an individual when asked to provide PII data? Indicate all that
\boxtimes	Priva	acy Act Statement Privacy Advisory
	Othe	r None
eac		A Department of Defense (DD) Form 2005, Privacy Act Statement - Health Care Records, is provide to the patient at the point of care. This form is maintained in the individual's medical records.
forn		PRIVACY ACT STATEMENT – HEALTH CARE RECORDS
		1. AUTHORITY FOR COLLECTION OF INFORMATION INCLUDING SOCIAL SECURITY NUMBER (SSN) Sections 133, 1071-87, 3012, 5031 and 8012, title 10, United States Code and Executive Order 9397.
		2. PRINCIPAL PURPOSES FOR WHICH INFORMATION IS INTENDED TO BE USED INFORMATION
		This form provides you the advice required by The Privacy Act of 1974. The personal information will facilitate and document your health care. The Social Security Number (SSN) of member or sponsor i required to identify and retrieve health care records.
		3. ROUTINE USES The primary use of this information is to provide, plan and coordinate health care. As prior to enactment of the Privacy Act, other possible uses are to: Aid in preventive health and communicable disease control programs and report medical conditions required by law to federal, state and local agencies; compile statistical data; conduct research; teach; determine suitability of persons for service or assignments; adjudicate claims and determine benefits; other lawful purposes, including law enforcement and litigation; conduct authorized investigations; evaluate care rendered; determine professional certification and hospital accreditation; provide physical qualifications of patients to agencies of federal, state, or local government upon request in the pursuit of their official duties.
		4. WHETHER DISCLOSURE IS MANDATORY OR VOLUNTARY AND EFFECT ON INDIVIDUAL O NOT PROVIDING INFORMATION
		In the case of military personnel, the requested information is mandatory because of the need to document all active duty medical incidents in view of future rights and benefits. In the case of all othe personnel/beneficiaries, the requested information is voluntary. If the requested information is not furnished, comprehensive health care may not be possible, but CARE WILL NOT BE DENIED.
		This all inclusive Privacy Act Statement will apply to all requests for personal information made by health care treatment personnel or for medical/dental treatment purposes and will become a permanent part of your health care record.

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Your signature merely acknowledges that you have been advised of the foregoing. If requested, a copy of this form will be furnished to you.

NOTE:

Sections 1 and 2 above are to be posted to the Component's Web site. Posting of these Sections indicates that the PIA has been reviewed to ensure that appropriate safeguards are in place to protect privacy.

A Component may restrict the publication of Sections 1 and/or 2 if they contain information that would reveal sensitive information or raise security concerns.

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